Guidance in **Forming the ATR-I Alliance and Sub-committees**

<u>A Presentation and Discussion</u>

Contact Persons

Pharis Stanger, Program Manager
IDHW Substance Abuse Program
208-334-4944 stangerp@idhw.state.id.us

John Kirsch, Substance Abuse Program Specialist
IDHW Substance Abuse Program
208-334-6680 kirschj@idhw.state.id.us
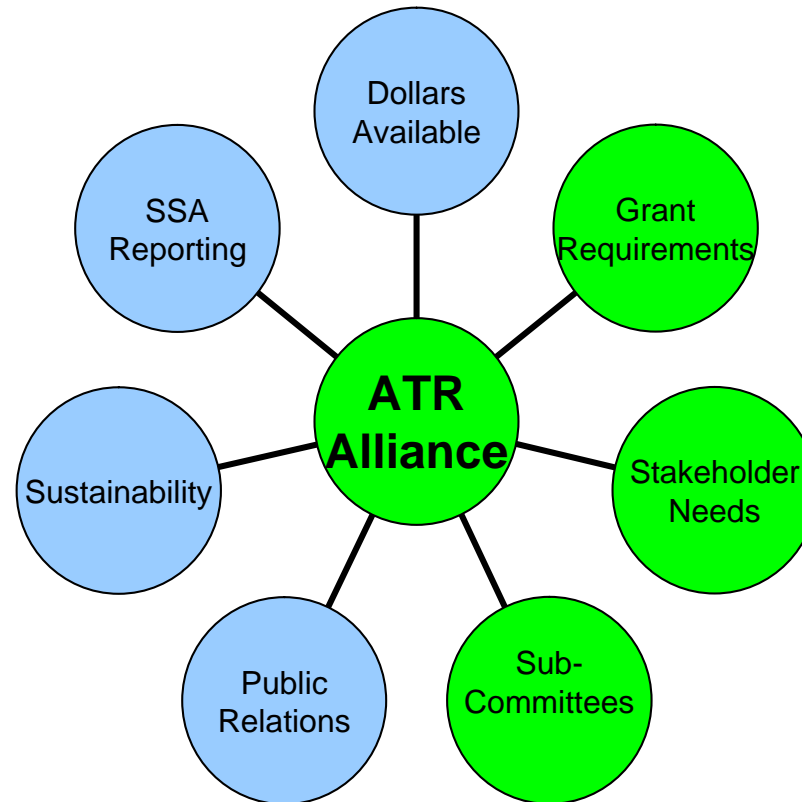
Acknowledgements

Alliance and Committee Chairs

- Recognition of the Variety and # of Groups Represented on the ATR-I Alliance – (Handout)

- Recognition of our Committee Co-Chairs (Handout)
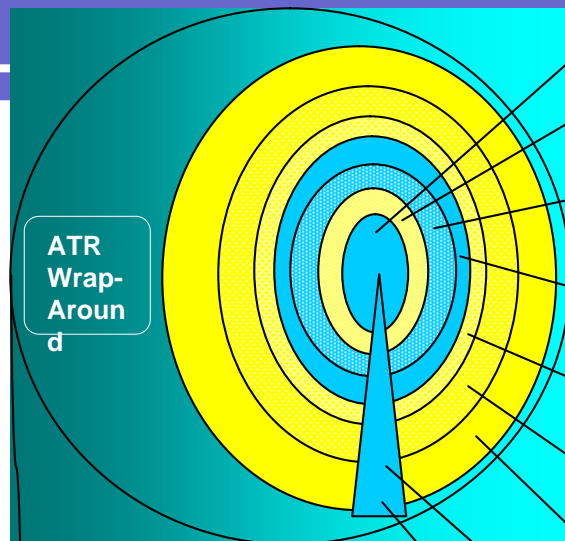
Thank You All for being here!

ATR-I Alliance

Decision Making and Guidance

**Substance Abuse Treatment
& Recovery Support Services
accessed through Portal to Recovery**

ATR Goals --
1. Provide client choice.
2. Expand access by using Faith-Based Providers.
3. Increase Treatment Capacity.

ATR Wrap-Around

Medical Detox

Detox

Adult Halfway Housing

Adolescent Transitional Housing

Residential

Intensive Outpatient

Outpatient

Methadone Maintenance

Case Management

Access To Recovery (ATR) Grant/Funding Source Guided by ATR Alliance

Substance Abuse Treatment Block Grant (SATBG) / Funding Source

Recovery Support Services Include:
Drug Testing
Transportation
Childcare
Marriage and Family Counseling
Relapse prevention
Employment counseling
and many culturally-relevant services

? ATR Funds may Supplement SATBG service levels but cannot supplant them
? Emphasis on Performance & Quality

Target Population

Level of Care	Current Beds	Current Clients Served	ATR-I Beds	ATR-I Clients Served	Total Clients (Current/ATR-I)
Adult					
Social Setting Detox	5	455	10	910	1365
Medical Detox	0	0	2	244	244
Residential Treatment	21	252	19	228	480
Halfway House	0	0	n/a	96	96
Outpatient	n/a	4434	n/a	2217	7131
Methadone Maintenance	0	0	n/a	30	30
Adolescent					
Residential	19	152	19	152	304
Transition Houses	n/a	0	n/a	96	96
Outpatient	n/a	970	n/a	485	1455

Levels of Service Identified and Budgeted

- Adult
  - Social Setting Detox
  - Medical Detox
  - Residential
  - Halfway House
  - Outpatient
  - Methadone Maintenance
  - Case Management
  - Alcohol/Drug Testing

  *Blue =New services

- Adolescent
  - Residential
  - Outpatient
  - Transitional Housing
  - Case Management
  - Alcohol/Drug Testing

Recovery Support Services Identified (Itemized Budget Pending)

- Substance Abuse Education
- Pre-screening
- Recovery Mentoring/Coaching
- Relapse Prevention
- Self-support Groups
- Temporary Housing
- Family/Marriage Counseling
- Spiritual Support
- Employment Counseling
- Transportation
- Child Care

*Blue =New services

Key Elements to Consider

- Genuine, Free and Independent Choice
- Vouchers
- Cannot Supplant current Funding
- Priority Populations
- Preferred Approved Provider Network
- Primary Referral Sources
- Technical Assistance Needs
- Key Relationships among Sub-Committees
- Recommendations to ATR-I Alliance

Client Choice – a Definition

Genuine, Free and Independent Choice

- For purposes of ATR funding **choice is defined as:** a client being able to select among at least two providers which are qualified to provide the services needed by the client, among them at least one provider to which the client has no religious objection.

Ensuring Client Choice

- Increase in # of Clinical Treatment Providers
- Develop a RSS Provider Pool
- Establish Web Based Portal

Voucher – a definition

A written authorization for a fiscally eligible participant to purchase a substance abuse assessment, clinical Treatment, or recovery support services funded by ATR-I

- **Payment for services measured as:**
  - a deliverable item (event)
  - a unit of service (hour/day, etc), or;
  - A treatment episode (bundle of services)

- **Issues to Consider**
  - Tracking procedures
  - Preventing Fraud and Abuse
  - Supplementing or enhancing non-ATR funded services
  - ATR fully funded service

Supplant – a functional definition

- Current non-ATR funding currently utilized for Clinical or Recovery Support Services must continue to be utilized to provide Clinical or Recovery Support Services.

Priority Populations –

<u>Grant Priorities</u>

- Hispanic Community
- Native American
- Rural/ Frontier Underserved

<u>Idaho Population Issues affected by priorities</u>

- Adult and Juvenile Populations
- Criminal/Juvenile Justice Issues
- State/County/City, etc.
- Co-occurring SA/MH issues
- Child Protection Issues
- Regional Representation
- Include members from recovering community

Preferred Approved Provider Network

- All **clinical providers** current and future must **meet qualifications per IDAPA 16.06.03 –** Rules and Minimum Standards Governing Alcohol/Drug Abuse Prevention and Treatment Programs

- **Standards for Recovery Support Services Providers** will be developed prior to providing direct client services and approved by the alliance. Sub-committee!

Primary Referral Sources

- IDOC
- DJC
- Drug Court
- County Probation (adolescent and adult)
- IDHW
  - Child Protective Services
  - Mental Health (co-occurring)
- Others

Technical Assistance Resources

- CSAT Training Services to the State Grantee regarding Implementation Issues at all levels.

- IDHW and/or Alliance Partners Training Services to all levels of the ATR-I funded services system.

- Management Services Contractor Training Services to all levels of the ATR-I funded services system.

Key Relationships among Subcommittees

- Identification of and sharing of information among Sub-committees
  - Standards
  - Outreach
  - Funding Distribution
  - Participant Eligibility (fiscal)

Sub-committee Recommendations
to the Alliance

- Process
  - Format and Content of Reports
  - Frequency of updates
  - Alliance Ad hoc requests
  - Timelines for completion of work

Forming the Alliance Discussion
Mrs. Kempthorne & staff

- See Agenda (attached)

Forming the Alliance
Process Tasks

- Define Purpose
- Level of authority
- Decision Making Process
- Clarify Objectives and Timelines
- Exit Criteria
- Membership

ATR-I Sub-committees
John Kirsch

ATR-I Sub-committees

1. Distribution of Funds
2. Recovery Support Services
   Provider Approval Standards
3. Hispanic/Latino Outreach
4. Participant Eligibility
5. C Q I – Measuring Performance and Impact
6. Native American Outreach and Progress (MOU each Tribe)
7. Faith-based Outreach
8. Rural/Frontier

Sub-committee Process Tasks

- Form the committee
  - Level of Authority
  - Decision Making Process
  - Membership
- Identify the Purpose
- Identify the Objectives with Time Lines
- Identify Exit Criteria
- Definitions
- Elements to consider

Distribution of Funds
Sub-committee

- **Goal** – Develop and recommend a formula for Distribution of ATR-I Funds
- **Target Date**: December 15, 2004
- **Process Tasks** – see slide #22
- **Content Considerations -**
  - Based 100% of poverty population
  - IDHW Regional Distribution
  - Priority populations specified in Grant
    - Tribal
    - Hispanic
    - Rural/Frontier
  - ATR-I Grant Requirements
  - Levels of Clinical Care
  - Recovery Support Services
  - Other Needs

Recovery Support Services Sub-committee
Provider Approval Standards

- **Goal** - Develop and recommend Recovery Support Services Providers Approval Standards
- **Target Date**: January 15, 2005
- **Process Tasks** - see slide #22
- **Content Considerations** –
  - Core Health and Safety Standards
  - Variety of RSS to be provided
  - Faith Based Programs
  - Community Based programs
  - Performance Standards
  - Identify and Collaborate with current programs and approval authorities

Hispanic/Latino Outreach
Sub-committee

- **Goal** – Recommend strategies for increasing Hispanic/Latino community access to publicly funded substance abuse treatment services
- **Target Date**: January 31, 2005
- **Process Tasks** - see slide #22
- **Content Considerations –**
  - Identify and Consult with Faith-based programs serving the Latino/Hispanic Community
  - Consult with public and private service providers currently serving the Latino/Hispanic Community
  - Identify key Hispanic/Latino Community organizations and individuals to assist in accessing services
  - Identify Needs and Barriers to Access

Participant Eligibility
Sub-committee

- **Goal** – Recommend fiscal eligibility standards for ATR-I participants

- **Target Date**: December 15, 2004

- **Process Tasks** - see slide #22

- **Content Considerations –**

  - Current adult client eligibility is based on 100% of Federal Poverty Guidelines with clients charged on a sliding fee scale up to 175% of Poverty based on family income and size.

  - Current capacity per Level of Care

  - Adolescents under 16 go on family income up to 175% of poverty with no co-pay

  - Adolescents 16 and older may go on their own or family income up to 175% of poverty with no co-pay

CQI Subcommittee – Measuring Performance & Impact

- **Goal** – Recommend a strategy/guidelines on measuring performance and impact on systems, processes and client outcomes
- **Target Date**: March 1, 2005
- **Process Tasks** - see slide #22
- **Content Considerations**
  - Systems Measures
    - Increased services to priority populations
    - Increased impact on criminal/juvenile justice and social services and health care costs
    - Public Relations Promotion
    - Data Collection
  - Process Measures
    - # clients served by LOC
    - #clients served in Recovery Support Services
  - Outcomes Measures (7 GPRA Domains):
    - Absence from Drug and Alcohol use, Employment/Education, Crime and Criminal Justice, Family and Living Conditions, Social Support of Recovery, Access/Capacity, Retention

Native American Outreach and Progress
Sub-committee (MOU each Tribe)

- **Goal** – Recommend Terms of each MOU between state and each Tribe to implement ATR-I
- **Target Date**: January 15, 2005
- **Process Tasks** - see slide #22
- **Content Considerations**
  - Sovereign Nation Status
  - Priority Population Status in Grant
  - Each Tribe has individual needs
  - Commonalities among Tribal needs
  - Data and Performance Reporting
  - Address Clinical Treatment and Recovery Support Services

Faith-based Outreach
Sub-committee

- **Goal** – recommend strategies to the Alliance to increase number of Faith-based programs providing Clinical and/or Recovery Support Services to the Publicly funded Treatment system.
- **Target Date**: January 31, 2005
- **Process Tasks** - see slide #22
- **Content Considerations**
  - Client Choice
  - Grant Priority
  - Charitable Choice
  - Provider Approval Standards
  - Identify and consult with current Faith-based/Government partnerships
  - Recognize Diversity among Faith Providers
  - Data and Performance Reporting for Clinical Treatment and Recovery Support Services

Rural/Frontier
Sub-committee

Goal – Recommend strategies to provide treatment and recovery support services to rural/frontier regions of Idaho

- **Target Date**: January 15, 2005
- **Process Tasks** - see slide #22
- **Content Considerations**
  - Needs (is data available)
  - Barriers
  - Resources
  - Common Issues
  - Unique Issues

Forming the Alliance Discussion
Mrs. Kempthorne & staff

- See Agenda (attached)

Forming the Alliance
Process Tasks

- Define Purpose
- Level of authority
- Decision Making Process
- Clarify Objectives and Timelines
- Exit Criteria
- Membership

Levels of Authority

Alliance/Sub-committee Actions	Decision Making Authority
Research the Problem, Report findings	*No authority, only reporting*
Research the problem, develop alternative solutions	*Solution options only*
Research, develop, recommend best solution for approval	*Recommend best solution*
Research, develop, select best solution. Report solution decision. Recommendations for implementation.	I*mplementation*
Research, develop, select, implement, inform, report	*Implement and report progress*
Develop, select, implement, evaluate	*Total authority* *No reporting necessary*